8. Information Education and Communication (IEC) activities for Public awareness have been intensified.

9. Capabilities for Epidemic preparedness and repid response are being strengthened.

Implementation of Family Welfare Programme at District Level

3055. SHRI R.S. GAVAI: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government have identified so far the districts requiring special attention for implementation of Family Welfare Programmes;

(b) if so, the details thereof; and

(c) if not, how long it would take to identify such districts?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI A. RAJA): (a) to (c) Details of district based programmes started during 2000-2001 under various Schemes of the National Family Welfare Programme are given below:—

Border District Cluster Project

The Border District Cluster Project has been launched on 3.5.2000 in 47 identified districts of 16 States. Details are given in Statement-I. *(See below)* Additional inputs are being given to these districts for improving implementation of interventions under the Reproductive and Child Health (RCH) Programme with the objective of reducing the Infant Mortality Rate (IMR) and Maternal Mortality Rate (MMR) by 50% over a 4-year period.

Reproductive and Child Health Outreach Scheme

The Reproductive and Child Health Outreach Scheme is being implemented to improve the delivery of maternal and child health service in remote areas and urban slums. Selected districts will be provided additional support for mobility of staff, improvement in

quality of services and generation of demand for services. In the current year this scheme has been ogarnised in the 50 district of 8 States *viz.* Assam (3), Bihar (8), Gujarat (3), Madhya Pradesh (11), Orissa (5), Rajasthan (5), Uttar Pradesh (12) and West Bengal (3).

Scheme for Strengthening of Newborn

Another Scheme for Strengthening of Newborn Care has been initiated in 60 districts of 13 States. Details are given in Statement-II *(See below).* It is proposed to expand the scheme over the next two to three years to cover all the weak districts. States have been asked to intimate the districts where this programme could be implemented in the subsequent years.

Reproductive and Child Health Camps

In order to improve the Maternal Health and Child Health of India, a new scheme of Reproductive and Child Health Camps is being organised. Such camps are a good way to reach the backward and undeserved people of the country.

107 districts in 17 States of the country have been identified for holding the Reproductive and Child Health Camps. Details are given in Statement-III. *(See below)*

Training of Traditional Birth Attendants (DAIs) under the Reproductive and Child Health Programme:

In order to provide *ante natal* check-up, identify high risk pregnancies and counseling on nutrition and safe delivery, conduct safe normal delivery and to identify danger signals during delivery and appropriate referral, Dai training programme is taken up under the RCH Programme initially in the districts, which have reported less than 30% safe delivery rates. Details of the districts identified for Dai Training during 2000-2001 is given in Statement-IV.

Statement I

Districts covered under the Border District Cluster Project

1.	Andhra Pradesh(3)	— Adilabad, Nizamabad, Medak.
2.	Bihar(3)	— W Singhbhoum, E. Singhbhoum, Ranchi.

3.	Gujarat(2)	— Dangs, Valsad.
4.	Haryana(2)	— Rewari, Gurgaon.
5.	Himachal Pradesh(2)	— Chamba, Kangra.
6.	J&K(2)	— Udhampur, Kathua.
7.	Karnataka(4)	— Bijaput, Gulbarga, Raichur, Bidar.
8.	Kerala(2)	— Iduki, Mallapuram.
9.	Madhya Pradesh(4)	— Morena, Shivpuri, Guna, Tikamgarh.
10.	Maharashtra(3)	— Nanded, Latur, Osmanabad.
11.	Orissa(3)	— Mayurbhani, Keonjhar, Balasore.
12.	Punjab(3)	— Hoshlapur, Gurudaspur, Ropar.
13.	Rajasthan(3)	— Dholpur, Jhalawat, Batan.
14.	Tamil Nadu(2)	— Thruvellore, Vellore.
15.	Uttar Pradesh(6)	— Lalitpur, Hamirpur, Banda, Mahowa, Chitrakoot, Jhansi.
16.	West Bengal(3)	— Purulia, Bankura, Medinipur.

Statement II

Districts covered by NNF in initial phase of Operationalisation of District Newbom Care, under RCH programme

Sl. No.	State		Districts
1	2	3	
1.	Andhra Pradesh	4	Ranga Reddy, Mehboobnagar, Warangal, Medak
2.	Bihar	6	Patna, Singhbhum West, Palamu, Nalanda, Madhuban and Chapra

1	2	3	
3.	Gujarat	5	Kutch, Banaskantha, Dangs, Pachmahal and Bharuch
4.	Karnataka	3	Mandya, Mysore, Tumkur
5.	Maharastra	4	Satara, Kohlapur, Thane and Nasik
6.	Madhya Pradesh	6	Ujjain, Khalgaon, Khandawa, Dewas, Dhar Obaidullaganj
7.	N.E.Region	1	Hailakandi (Assam)
		1	Dhubri (Assam)
		1	Aizwal (Mizoram)
		1	Dhamanagar (Tripura)
		1	Imphal (Manipur)
		1	Tura (Meghalya)
8.	Orissa	4	Bolangir, Sundergarh, Samphalpur, Bargarh
9.	Punjab	4	Faridkot, Faithgarh, Patiala and Amritsar
10.	Rajasthan	4	Jodhpur, Jalaur, Pali and Barmer
11.	Tamil Nadu	5	Dharampuri, Madurai, Dundigal, Tiheni and Salem
12.	Uttar Pradesh	5	Faizabad, Gonda, Chamoli, Sultanpur and Paui Garhwal
13.	West Bengal	3	Darjeeling, Bankura and Purulia

Statement- III

List of Districts identified for holding the Reproductive Child Health Camps during 2000—2001.

1.	Assam(5)	Nagaon, Karbi Anglong, North Cachar Hills, Goalpara, Dhubri

2.	Bihar(16)	Kishenganj, Palmau, Sitamarhi, Araria, Madhepur, Samastipur, Sahebganj, Pas. Champaran, Katihar, Purnia, Madhubani, Godda, Giridih, Devgarh, Purbi Champaran, Patna.
3.	Chhattisgarh(4)	Bilaspur, Baster, Sarguja, Rajnandgaon
4.	Haryana(4)	Gurgaon, Kaithal, Faridabad, Jind
5.	Jharkhand(6)	Dumka, Gumla Lahardaga, West Singhbhum, Ranchi, Dhanbad.
6.	Madhya Pradesh (5+7*)	Sidhi, Shivpuri Panna, Tikamgarh, Satna
7.	Nagaland(1)	Tuensang
8.	Orissa(7)	Nawarangpura, Malkangiri, Kalahandi, Koraput, Boudh, Nawapada, Phulbani
9.	Rajasthan(11)	Barmer, Jaisalmer, Dholpur, Churu, Tonk, Bharatpur, Nagaur, Alwar, Jalore, Banswara, Jhalawar
10.	Uttar Pradesh(32)	Bahraich, Gonda, Badaun, Sidharthanagar, Banda, Etah, Maharajganj, Pilibhit, Barabanki, Sitapur, Basti, Sonbhadra, Hardoi, Kheri, Ferozabad, Hathars, Mahoba, Mainpuri, Unnao, Mirzapur, Rai Bareilly, Badohi, Lalitpur, Bareilly, Ambedkarnagar, Allahabad, Sultanpur, Pratapgarh, Azamgarh, Faizabad, Doria, Fatehpur
11.	Uttaranchal(2)	Uttarkashi, Udham Singh Nagar.
12.	Arunachal Pradesh (2)	East Kameng, Upper Subansiri
13.	Meghalaya(2)	South Garohills, East Garohills
14.	Mizoram(1)	Chimturipui
15.	Sikkim(1)	West Sikkim
16.	Tripura(1)	North Tripura

Statement IV

Training of birth Attendants/Dais (2000-2001)

Sl. No.	State with No. of districts	Districts
1	2	3
1.	Assam(11)	Lakhimpur, Morigaon, Karbi Anglong, Bongaigaon, Dhemaji, Karimganj, Sonitpur, North Cachar Hills, Goalpara, Dhubri & Naogoan
2.	Arunachal Pr.(9)	Dibang Valley, Tirap, East Siang, Papumpara, W. Kameng Uppar Subansiri, Uppar Siang, East Kameng, Tawang.
3.	Bihar(23)	Buxar, Begu Sarai, Nawada, Purnia, Aurangabad, Mongheyr, Gopalganj, Saharsa, Siwan, Vaishali, Bhagalpur, Khagaria, Gaya, West Champaran, Darbhanga, East Champaran, Sitamari, Madhepura, Araria, Madhubani, Katihar, Kishanganj, Samastipur
4.	Gujarat(1)	Dangs
5.	J&K(2)	Udhampur, Rajouri
6.	Madhya Pr.(10)	Tokamgarh, Balaght, Raisin, Damoh, Narsimhapur, Vidisha, Chhatarpur, Jhabua, Rewa, Bhind, Mandla, Satana, Panna, Sidhi.
7.	Manipur(3)	Ukhrul, Taminglong, Imphal
8.	Meghalaya(3)	West Garo Hills, East Garo Hills, South Garo Hills.

1	2	3
9.	Mizoram(1)	Chhimtuipui
10.	Nagaland(3)	Mon, Phek, Tuensang
11.	Orissa(14)	Raigada, Deogarh, Keonjhar, Mayurbanj, Balasore, Gajapati, Kalahandi, Angur, Boudh, Nawapada, Phulbani, Koraput, Nowrangpur, Malkangiri
12.	Rajasthan(6)	Jalour, Alwar, Hanumangarh
13.	Sikkim(2)	West Sikkim, North Sikkim
14.	Uttar Pradesh(33)	Hardoi, Partapgarh, Rai Bareilly, Faizabad, Sitapur, Sonbhadra, Mahoba, Mirzapur, Deoria, Fatehpur, Gorakhpur, Bhadoli, Fairozabad, Basti, Banda, Lalitpur, Farukhabad, Hathras, Unnao, Ambedkarnagar, Pilibhit, Badaun, Hamirpur, Barabanki, Kanpur (Dehat), Ettawah, Shahjehanpur, Menpuri, Gonda, Siddhartnagar, Kheri, Maharajganj, Baharaich
15.	West Bengal(3)	Malda, West Dinajpur, Uttar Dinajpur.

Health expenditure

3056. SHRI SWARAJ KAUSHAL: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state the total health expenditure, as percentage of GDP, for the years 1997-98, 1998-99, 1999-2000 and the financial provision for 2000-2001?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI A. RAJA): As per the World Health Report, 2000 the total expenditure on Health as percentage of GDP for 1997 was 5.2. Figures for later